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CONFIRMATION NO. 8969

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| SERIAL NUMBER 10/687,289 | FILING DATE 10/15/2003 RULE | CLASS 607 | GROUP ART UNIT 3762 | ATTORNEY DOCKET NO. 011738.00141 |
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APPLICANTS

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** CONTINUING DATA *****

This appln claims benefit of 60/503,998 09/19/2003
 and claims benefit of 60/418,553 10/15/2002

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 01/22/2004

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|---|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY KS | SHEETS DRAWING 33 | TOTAL CLAIMS 37 | INDEPENDENT CLAIMS 4 |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | | | |
| Verified and Acknowledged <u>Alyssa Allen</u> Examiner's Signature Initials | | | | |

ADDRESS

22908

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CHICAGO , IL

60606

TITLE

Multi-modal operation of a medical device system

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